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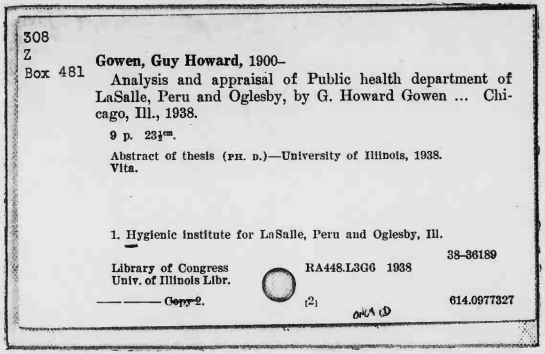

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ANALYSIS AND APPRAISAL OF PUBLIC HEALTH DEPARTMENT OF LASALLE, PERU AND OGLESBY

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BY

G HOWARD GOWEN

B.S., Northwestern University, 1926
M.D., Northwestern University, 1926
M.S., University of Illinois, 1933

AN ABSTRACT OF A THESIS

SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF DOCTOR OF PHILOSOPHY IN BACTERIOLOGY IN THE GRADUATE SCHOOL OF THE UNIVERSITY OF ILLINOIS, 1938

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Feb. 17, 1939 Gi

ANALYSIS AND APPRAISAL OF PUBLIC HEALTH DEPARTMENT OF LASALLE, PERU AND OGLESBY

An analytical study was made of the Health Department of LaSalle, Peru and Oglesby, Illinois, for the purpose of evaluating and appraising its activities in accordance with the standards as recommended by the Committee on Administration Practice of the American Pubilc Health Association employing the Appraisal Form for City Health Work as revised January, 1934. The period under consideration extended from January 1, 1935, to January 1, 1936. The activities studied were vital statistics, laboratory service, acute communicable diseases, venereal diseases, tuberculosis control, maternity hygiene, infant hygiene, preschool hygiene, school hygiene, general sanitation, and food and milk sanitation. Each section is graded on the basis of deviation in points from 100 as determined by detailed analysis of all pertinent activities related to that section. The points allotted are then multiplied by a weighting factor; the product giving the total weighted score for that section. In assigning weights to the various sections, consideration was given to the present state of development in the particular fields of activity as well as to the relative importance of the activity in health promotion. The total of the weighted scores for each section gives the final evaluation to which an arbitrary number of points are added depending upon the final score attained; for example, if the final grade were over 900, 50 points would be added, if between 800 and 900, forty points would be added, etc. The method as applied will be shown in the final evaluation. The various activities will now be briefly described as evaluated.

The following services received a perfect grade: Laboratory, Tuberculosis Control, Infant Hygiene, Preschool Hygiene, and School Hygiene.

There is a well organized laboratory giving free service to the community in regard to the control of communicable disease, and also diagnostic service to the physicians in relation to diseases other than the aforementioned group. During the year 1935, a total of 6964 laboratory examinations were made.

The program relating to infant hygiene, preschool hygiene, and school hygiene is on a firm basis and might well serve as a model to health districts where such activities are neglected.

The tuberculosis control program entails all the phases essential for satisfactory promulgation of such activity. The only way amplification could occur would be in regard to what one might term the refinements of tuberculosis. This has already been anticipated, if funds are available, and will entail tuberculin testing and X-ray of positive reactors.

In regard to vital statistics there can be no criticism, except for the fact that certificates of births and deaths are not stored in a fireproof building, vault or safe. The potential irreparable loss that migh occur in this regard cannot be over emphasized and a deduction of five points is made because of the lack of such facilities. All data relating to births and deaths are presented each year in printed form in the current annual report.

In communicable disease control two points are deducted because the investigatitve visits per case of typhoid fever were one-half those required by the standard, and eight points are deducted because less than 70 per cent of first grade children had been vaccinated against smallpox whereas the standard sets the quota at 95 per cent and allows no credit for 70 per cent or less. Although only given 90 points ,the deduction is only a relative affair, and the communicable disease program is one which the community can well be proud of. The deduction of eight points because only 70 per cent of first grade children are vaccinated against smallpox is not consistent in a State where vaccination is not compulsory. Persistently maintaining a 70 per cent vaccinated population in the first grade of schools in a community where parental consent must first be obtained, is not to be criticized too strongly but should be accredited. It should be noted also, that by the time the children reach third grade, 90 per cent have been vaccinated against smallpox.

The venereal disease program is extremely weak. Seventy-eight points are deducted because of the non-existence of a clinic, incomplete reporting, lack of epidemiologic determination of sources of contact, and lack of public instruction in this regard. There will have to be complete reorganization and such a procedure is in progress at the present time through the medium of Social Security funds.

In considering the maternal hygiene program one point is deducted because the ratio of nursing visits to maternity cases is 4.2 as compared to five in the standard. No significance should be attached to this condition however, inasmuch as the majority of maternity cases are hospitalized and necessarily results in a lowering of the possible home nursing visits.

Activities are weak in regard to general sanitation, food and milk. In general sanitation five points are subtracted, because only 95 per cent of the dwellings receive city water, ten points are taken off because only 95 per cent of the dwellings are connected with street sewers and ten points are deducted because there is no plan for the examination and approval of buildings before construction, and inspection of existing buildings. In regard to sanitation of food, six points are deducted because permits are not granted to food establishments after inspection and approval, and eight points are deducted because there is no inspection of slaughtering and meats. In regard to milk sanitation, five points are deducted because only 95 per cent of the community milk is pasteurized, one point is deducted because milk bottles do not show date of production in the case of raw milk, and date of pasturization in the case of pasteurized milk. One point is deducted because there is no ordinance that milk sold in eating establishments must be served in the original containers and opened in the presence of the customer. It should be noted that many of the deductions have been made in regard to those activities which would of necessity require the passage of an ordinance of enforcement. If there are no ordinances, the health department is not empowered to act in the specified regard. The deductions, therefore, relating to these phases in no way reflect on the efficiency of the health department, but distinctly indicates local governmental inertia. Unfortunately ,however, the health department suffers in this re-

gard from the point of view of evaluation and grading of activities.

The following table shows the number of points out of a possible 100 allocated to each sectional activity, the weighting factors, the total weighted score for each section, and finally a summation of the weighted scores.

	Points Assigned Sections	Weighting Factor	Total Weighted Score
I. Common Services			
1. Vital Statistics	95	0.45	42.7
2. Laboratory	100	0.60	60.0
II. Preventable Disease Activities			
1. Acute Communicable Diseases	90	1.55	139.5
2. Venereal Diseases	22	0.65	14.3
3. Tuberculosis Control	100	0.90	90.0
III. Activities for the Promotion of Hygiene of the Individual			
1. Maternity Hygiene	99	0.90	89.1
2. Infant Hygiene	100	0.90	90.0
3. Preschool Hygiene	100	0.90	90.0
4. School Hygiene	100	1.10	110.0
IV. Sanitation Activities			
1. General Sanitation	75	0.80	60.0
2. Food and Milk	79	0.75	59.5
TOTAL WEIGHTED SCORE			849.1
Points Allowed			40.0
GRAND TOTAL			889.1

The Health Department under consideration has made a grade of 889.1 out of a possible 1000.

VITA

The writer, G. Howard Gowen, was born in Chicago on August 1, 1900. His grammar school education was obtained primarily at the Douglas School in Chicago, except for ten months spent at the College Rolin in Paris, France. He attended the University High School of the University of Chicago from which institution the diploma of graduation was issued in June, 1918. Premedical education was obtained at Northwestern University, Evanston, and medical education at Northwestern University Medical School, Chicago. The degree of Bachelor of Science and Doctor of Medicine were granted in June, 1926.

The writer was licensed to practice medicine and surgery in 1926 and was in active practice from June 1, 1927, to July 1, 1936. An eighteen months interneship was spent at the Cook County Hospital, Chicago, from July 1, 1925 to January 1, 1927. From October 1932 to the present time he has been doing graduate work at the University of Illinois College of Medicine in the Department of Pathology and Bacteriology, and also teaching in bacteriology and public health. The degree of Master of Science was granted by the University of Illinois in September 1933. For the past year the writer has been a member of the faculty of the University of Illinois College of Medicine in the capacity of instructor in the department of Pathology and Bacteriology, and has served as Assistant to the Chief of the Division of Communicable Diseases of the Illinois Department of Health, from July 1, 1936 to date.

The writer is a member of the American Public Health Association, the Society of American Bacteriologists, the Society of Illinois Bacteriologists, the American Medical Association, the Illinois State Medical Society, and the Chicago Medical Society. In the past he has served as Secretary, and President of the Stock Yards Branch of the Chicago Medical Society, Alternate-Councilor-at-Large of the Chicago Medical Society, and Delegate to the Illinois State Medical Society. During 1937 he will act in

the capacity of chairman of the Section on Health of the Illinois Conference on Social Welfare. The writer is a member of the Sigma Nu and Phi Rho Sigma Fraternities.

The writer's publications are as follows:

1. The Detection of Albumin in Cloudy Urine.
   Ill. Med. Jour., July, 1932.
2. Acute Gangrenous Appendicitis with Unusual Pathologic Findings.
   Ill. Med. Jour., Vol. LXIII, No. 1, January, 1933.
3. Osteitis Tuberculosa Multiplex Cystica (Jungling).
   Jour. of Bone and Joint Surg., Vol. XV, No. 1, January, 1933.
4. Treatment and Prevention of Rhus Toxicodendron Poisoning.
   Jour. of Allergy, Vol. IV, No. 6, September, 1933.
5. Source of Staphylococci on Normal Conjunctiva of Human Eye.
   Am. Jour. of Ophthalmol., Vol. 17, No. 1, January, 1934.
6. A Case of Friedlander's Bacillus Meningitis Secondary to Bilateral Acute Otitis Media.
   Ill. Med. Jour., June, 1934.
7. Newer Knowledge of Bacteriology Applied to Ophthalmology.
   Am. Jour. of Ophthalmol., Vol. 17, No. 9, September, 1934.
8. The Statistical Status of Diabetes.
   Ill. Med. Jour., April, 1935.
9. Temperature Changes in the Conjunctiva in Relation to Application of Heat and Cold to the Skin.
   Am. Jour. of Ophthalmol., Vol. 18, No. 4, April, 1935.
10. The Dissociative Influence of the Normal Rabbit Conjunctiva on Beta Hemolytic Streptococci.
    Am. Jour. of Ophthalmol., Vol. 18, No. 12, December, 1935.
11. Vital Statistics as an Indicator of Accuracy of Diagnosis.
    Ill. Med. Jour., February, 1936.

12. Fluctuations in Basophilic Aggregation Counts with Meterorologic Alterations.
    Jour. of Lab. and Clin. Med., Vol. 21, No. 7, April, 1936.
13. Correlation of the Bacteriological and Clinical Course in Phage Therapy of Chronic Furunculosis of the Face.
    Ill. Med. Jour., July, 1936.
14. Tracing Typhoid.
    Illinois Health Messenger, Vol. 8, No. 20, October 15, 1936.
15. A Practical Method of Measuring and Recording Skin Test Reactions.
    Jour. of Lab. and Clin. Med., Vol. 22, No. 2, November, 1936.
16. Effectiveness of the Oral Administration of Ephedrine in the Common Cold.
    Ill. Med. Jour., February, 1937.
17. The Rate of Disappearance of Bacteria from the Skin of the Normal Eyelids and the Normal Conjunctiva.
    Ill. Med. Jour., March, 1937.
18. The Effect of Blood Pressor Episodes on Basophilic Aggregation Counts.
    Jour. of Lab. and Clin. Med., Vol. 22, No. 6, March, 1937.
19. The Periodicity of Poliomyelitis.
    Illinois Health Messenger, April 15, 1937.
20. Typhoid Carrier Control in Illinois.
    On Press, Ill. Med. Jour. (Read before Section on Public Health and Hygiene, Annual Meeting, Illinois State Medical Society, Peoria, May 19, 1937.)
21. Onset and Course of Epidemic Meningitis as Related to Fluctuations in Temperature and Barometric Pressure.
    On Press, Jour. of Lab. and Clin. Med.
22. Chickenpox and Smallpox.
    Illinois Health Messenger, Aug. 15, 1937.
23. Mobile Laboratory Aids Disease Control.
    Illinois Health Messenger, July 1, 1937.
24. Rabies in Illinois 1936.
    Illinois Med. Jour., August, 1937.

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